## DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

KEYSTROKE TRAPPING SYSTEM,	KEYSTROKE T	RAPPING N	METHOD AND KEYSTROKE	[RAPPI	NG PROC	GRAM	
the application of which is attached hereto	OR	Numbe	☐ was filed on as United States Application Number or PCT International Application Number (Confirmation No), and was amended on (if applicable).				
I hereby state that I have reviewed an by any amendment specifically referre	d understand the old to above.	contents of th	e above identified application,	includi	ng the cla	ims, as amende	
I acknowledge the duty to disclose continuation-in-part application(s), m the national or PCT international filing	aterial informatior	which becar	me available between the filing	in 37 g date of	CFR 1.56 f the prior	6, including for application an	
I hereby claim foreign priority benefit or plant breeder's rights certificate(s), than the United States of America, li- patent, inventor's or plant breeder's ri- application on which priority is claimed	or 365(a) of any sted below and ha ghts certificate(s),	PCT internative also ident	tional application(s) which des ified below, by checking the b	ignated ox. anv	at least or foreign a	ne country other	
Prior Foreign Application Number(s)	Cou	ntry	Foreign Filing Date		Priority Claimed Yes No		
312953/2002	Japa		(Day/Month/Year) 28/10/2002		Ø		
I hereby claim domestic priority benef States provisional application(s), or § insofar as the subject matter of eac International application in the manne to disclose any information material t filing date of the prior application and	365(c) of any PCT h of the claims or provided by the othe patentability the national or PC	Γ Internations of this applic first paragrap of this appli T internation	al application(s) designating the ation is not disclosed in a light of Title 35, United States Contaction as defined in 37 C.F.R. al filing date of this application	e United sted pri ode, §11 1.56 wl	I States, I or United 2, I ackno	isted below and I States or PC owledge my dut	
Prior U.S. or International Application	Number(s)	U.S. or In	ternational Filing Date		Status		
I hereby appoint all attorneys of SUG my attorneys to prosecute this applic therewith, recognizing that the specifidiscretion of Sughrue Mion, PLLC, at the same USPTO Customer Number.	ation and to trans: ic attorneys listed	act all busine under that C	ess in the United States Patent ustomer Number may be channed about the application be ad	and Tra	idemark C n time to	Office connected time at the sol	
I hereby declare that all statements ma are believed to be true; and further th	de herein of my o	wn knowledg s were made	ge are true and that all statemen with the knowledge that willfo	ts made	on inform	nation and belie	

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made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the

validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:								
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City	State	Zip		Country				
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Given Name (first and middle [if any]) Family Name or Surname								
Inventor's Signature		Date						
Residence: City	State	Country	·	Citizenship				
Mailing Address:								
City	State	Zip	Country					
NAME OF THIRD INVENTOR:								
Given Name (first and middle [if any])		Family Name or Surname						
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Residence: City	State	Country Citizenship		Citizenship				
Mailing Address:								
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NAME OF FOURTH INVENTOR:								
Given Name (first and middle [if any])		Family Name or Surname						
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Residence: City	State	Country Ci		Citizenship				
Mailing Address:								
City	State	Zip		Country				
NAME OF FIFTH INVENTOR:								
Given Name (first and middle [if any])	Family Name or Surname							
Inventor's Signature		Date						
Residence: City	State	Country Citizenship		Citizenship				
Mailing Address:								
City	State			Country				